

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>1/22/00</u>		2 Serial/Patent # <u>08/867612</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time	26	1/8/00	\$ 890.
<input checked="" type="checkbox"/>	Notice of Appeal/Appeal			\$
	Petition			\$
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
7 TOTAL AMOUNT OF REFUND			\$ 890	
8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check		
	Overpayment	Credit Deposit A/C #:		
	Duplicate Payment	9 01--0483		
<input checked="" type="checkbox"/>	No Fee Due (Explanation):			
EXTENSION of Time period is OVER, NO FEE DUE AT this time.				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Irving Fingle</u>		TITLE: <u>PARALEGAL</u>		
SIGNATURE: <u>[Signature]</u>		PHONE: <u>306-5684</u>		
OFFICE: <u>Petitions</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>[Signature]</u>		DATE: <u>1/23/01</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**